

\$3621



In re Application of:

PIERO ALTOMARE

Application No.: 09/996,881

Filed: November 30, 2001

For: INTERFACE MODULE FOR DOCUMENT-BASED ELECTRONIC BUSINESS PROCESSES
BASED ON TRANSACTIONS

Docket No. 00366.000153

Examiner: B. Bayat

Group Art Unit: 3621

Date: January 6, 2003

THE COMMISSIONER FOR PATENTS
Washington, D.C. 20231

01/08/2003 LHMNDIM1 00000010 09996881

01 FC: \$182 648.00 DP
02 FC: \$201 420.00 DP

RECEIVED

JAN 09 2003

GROUP 3600

Transmitted herewith is a Preliminary Amendment in the above-identified application.

☐ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 68	MINUS	** 32	= 36	x \$9 \$18	\$ 648.00
INDEP. CLAIMS	* 8	MINUS	*** 3	= 5	x \$42 \$84	\$ 420.00
Fee for Multiple Dependent claims \$140°/\$280						\$ -0-
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$1068.00

- * If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

☐ °Verified Statement claiming small entity status is enclosed, if not filed previously.

☒ A check in the amount of \$ 1068.00 is enclosed.

☐ Charge \$ _____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.

☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.

☐ A check in the amount of \$ _____ to cover the fee for a _____ month extension is enclosed.

☐ A check in the amount of \$ _____ to cover the Information Disclosure Statement fee is enclosed.

☒ Applicant's undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.

Respectfully submitted,


Attorney for Applicant

Registration No. 46,551

FITZPATRICK, CELLA, HARPER & SCINTO
30 Rockefeller Plaza
New York, New York 10112-3801
Facsimile: (212) 218-2200